

UNITED STATES DISTRICT COURT
DISTRICT OF DELAWARERobert D. Brown

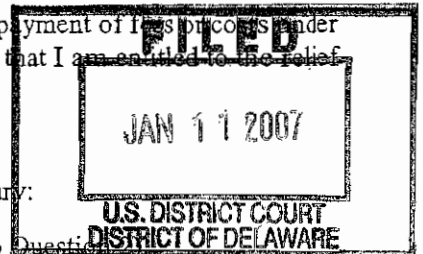
Plaintiff

Wilmington Police Department Captain
Officers Rinehart & Deysdale

Defendant(s)

APPLICATION TO PROCEED
WITHOUT PREPAYMENT OF
FEES AND AFFIDAVITCASE NUMBER: 07-23-I, Robert Dwayne Brown declare that I am the (check appropriate box)☒ Petitioner/Plaintiff/Movant☐ Other

in the above-entitled proceeding; that in support of my request to proceed without prepayment of fees or costs under 28 USC §1915, I declare that I am unable to pay the costs of these proceedings and that I am entitled to the relief sought in the complaint/petition/motion.



In support of this application, I answer the following questions under penalty of perjury:

1. Are you currently incarcerated? ☒ Yes ☐ No (If "No" go to Question 2)If "YES" state the place of your incarceration Howard R. Young Correctional InstituteInmate Identification Number (Required): 231393Are you employed at the institution? no Do you receive any payment from the institution? noAttach a ledger sheet from the institution of your incarceration showing at least the past six months' transactions2. Are you currently employed? ☐ Yes ☒ No

a. If the answer is "YES" state the amount of your take-home salary or wages and pay period a and give the name and address of your employer.

b. If the answer is "NO" state the date of your last employment, the amount of your take-home salary or wages and pay period and the name and address of your last employer. FEBRUARY 6, 20063. In the past 12 twelve months have you received any money from any of the following sources? Almost \$300.00, FEBRUARY 7th, JEDDERSON STREET CHILD CARE 1801 JEDDERSON STREET 19802

- | | | |
|---|--------------------------------------|--------------------------|
| a. Business, profession or other self-employment | <input type="radio"/> Yes | <input type="radio"/> No |
| b. Rent payments, interest or dividends | <input type="radio"/> Yes | <input type="radio"/> No |
| c. Pensions, annuities or life insurance payments | <input type="radio"/> Yes | <input type="radio"/> No |
| d. Disability or workers compensation payments | <input type="radio"/> Yes | <input type="radio"/> No |
| e. Gifts or inheritances | <input type="radio"/> Yes | <input type="radio"/> No |
| f. Any other sources | <input checked="" type="radio"/> Yes | <input type="radio"/> No |

If the answer to any of the above is "YES" describe each source of money and state the amount received AND what you expect you will continue to receive. I've had four money

ORDERS, two from my Grandmother and two from my sister. My Grandmother sent \$25 and \$10 my sister sent \$22. I will have

AO 240 Reverse (Rev. 10/03)
DELAWARE (Rev. 4/05)

Receiving any more money due to their
financial expenses.

4. Do you have any cash or checking or savings accounts?

•• Yes

•• No

If "Yes" state the total amount \$ _____

5. Do you own any real estate, stocks, bonds, securities, other financial instruments, automobiles or other valuable property?

•• Yes

•• No

If "Yes" describe the property and state its value.

6. List the persons who are dependent on you for support, state your relationship to each person and indicate how much you contribute to their support, OR state NONE if applicable.

J. D. B. And J. R. E. , I'm their
father and currently I'm unable to contribute
anything.

I declare under penalty of perjury that the above information is true and correct.

1-8-07

DATE

SIGNATURE OF APPLICANT

NOTE TO PRISONER: A Prisoner seeking to proceed without prepayment of fees shall submit an affidavit stating all assets. In addition, a prisoner must attach a statement certified by the appropriate institutional officer showing all receipts, expenditures, and balances during the last six months in your institutional accounts. If you have multiple accounts, perhaps because you have been in multiple institutions, attach one certified statement of each account.

RESIDENT HISTORY REPORT

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HRYCI

12/22/06 11:00

ST 007 / OPR JMH

- 0 7 : - 2 3 -

SBI : 231393
 Resident Name : BROWN, ROBERT D
 Time Frame : 02/16/2006 11:46 - 12/22/2006 11:00

Date	Time	Type	ST	OPR	Receipt #	Amount	Balance
02/16/2006	11:46	Close	6	kjg	F16896	90.18	0.00
08/23/2006	14:29	Add	4	SED	D53371	25.00	25.00
08/29/2006	05:46	Order	2	WLH	B130238	24.75	0.25
09/08/2006	11:52	Add	4	SED	D54216	20.00	20.25
09/11/2006	06:41	Order	2	WLH	B132017	20.12	0.13
09/14/2006	13:59	Rec Payment	10	bsp	J5715	0.10	0.03
10/24/2006	13:21	Add	4	SED	D57025	10.00	10.03
10/25/2006	13:53	Rec Payment	10	bsp	J6448	2.00	8.03
10/27/2006	15:25	Rec Payment	10	bsp	J6488	1.35	6.68
10/30/2006	06:32	Order	2	WLH	B139143	6.27	0.41
12/15/2006	13:57	Add	8	bsf	H26670	22.00	22.41
12/18/2006	06:34	Order	2	WLH	B146376	22.21	0.20

